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UTILITY		Attorney Dock	Docket No. 03500.017434				
PATENT APPLICATION				First Named Inventor or Application Identifier		ation Identifier	
TRANSMITTAL			KENJI NIIBORI, ET AL.				
(Only for new nonprovisional applications under 37 CFR 1.53(b))			Express Mail Label No.				
ADD	Express Mail	Label IVo.	Mail Stop F	Patent Application			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDR	ESS TO:	Commission P.O. Box 1	ner for Patents	
Fee Transmitt (Submit an orig	al Form inal, and a duplicate for fee pr	ocessing)	7.	CD-ROM or Program (A)	CD-R in duplicate, opendix)	large table or Com	puter
2. Applicant clair See 37 CFR	ms small entity status. 1.27.		8.		ind/or Amino Acid S all necessary)	equence Submiss	ion 0.4.4
3. X Specification	Total Pag	ges 53		a C	Computer Readable	Form (CRF)	2771
4. X Drawing(s) (3	5 USC 113) Total She	eets 14			ition Sequence Listi CD-ROM or CD-R (-	354 10/6
5. Oath or Decla	ration Total Pag	ges			paper	,z copies), oi	71
a 🗔 No	wly executed (original or co	mu)		c. S	Statements verifying	identity of above o	onies
a	wiy executed (original of co	P1)			PANYING APPLIC		
b. Co	9.	Assignment	Papers (cover sheet	& document(s))			
i. [DELETION OF IN\ Signed Statement at		10.	37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney			
		the prior application,	see 11.	English Trai	nslation Document	(if applicable)	
6. X Application D	ata Sheet. See 37 CFR 1.7	76	12.	Information Statement (I	Disclosure IDS)/PTO-1449	Copies Citation	
•			13.	Preliminary		D 503)	
			14. X		eipt Postcard (MPE specifically itemized		
			15.		py of Priority Docun iority is claimed)	nent(s)	
	16	Other:					
17. If a CONTINUING	APPLICATION check and	ronriate hov and eur	only the requisite is	oformation:			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Divisional Continuation-in-part (CIP) of prior application No							
Prior application informat	ion: Examiner_			Group/Art U	nit:		
considered a part of the d	DIVISIONAL APPS only: 1 isclosure of the accompanying tion has been inadvertently	ng continuation or divi	sional application a	nd is hereby in			
		18. CORRE	SPONDENCE ADD	RESS			
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below							
NAME							
Address					,		
City		State Telephone			Zip Code Fax		

Telephone

Country

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	19-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 84.00 =	\$0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$280.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	\$750.00
			Total of	above Calculations =	\$750.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$750.00
19. Si	mall entity status A small e	ntity statement is enclose	ed	107/12	1 47.00.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Scott D. Malpede - Reg. No. 32 533			
SIGNATURE	Sut D. Miles			
DATE	July 28, 2003			

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